

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET  
(FOR USE WITH FORM PTO-875)**

SERIAL NO.  
**10/697988**

FILING DATE

APPLICANT(S)

**CLAIMS**

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT								
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	INC.	DEP.
1	1												
2							61						
3							62						
4		1					63						
5	1						64						
6	1						65						
7							66						
8		2					67						
9	1						68						
10		1					69						
11		2					70						
12		2					71						
13	1						72						
14	1						73						
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	8						TOTAL						
	11						IND.						
	18						DEP.						
							TOTAL						
							IND.						
							DEP.						
							TOTAL						
							IND.						
							DEP.						

\*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

U.S. DEPARTMENT OF COMMERCE  
Patent and Trademark Office

**BEST AVAILABLE COPY**

# Index of Claims

Application No.

10/697988

Applicant(s)

Examiner

Art Unit

✓	Rejected
=	Allowed

-	(Through numeral) Cancelled
+	Restricted

N	Non-Elected
I	Interference

A	Appeal
O	Objected

Claim	Date
Final	Original
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Claim	Date
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Claim	Date
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